

**COMBINED DECLARATION AND POWER OF ATTORNEY
FOR PATENT APPLICATION**
(Page 2)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Sole or First Inventor Toshikazu OHSHIMA
Inventor's signature Toshikazu Ohshima
Date Feb. 14, 2000 Citizen/Subject of JAPAN
Residence 30-21-607, Minamikase 4-chome, Saiwai-ku,
Kawasaki-shi, Kanagawa-ken, Japan
Post Office Address c/o MIXED REALITY SYSTEMS LABORATORY INC.,
145, Hanasakicho 6-chome, Nishi-ku, Yokohama-shi,
Kanagawa-ken, Japan

Full Name of Second Joint Inventor, if any Kiyohide SATO
Second Inventor's signature Kiyohide Satoh
Date Feb. 9, 2000 Citizen/Subject of JAPAN
Residence 495-301, Kizuki, Nakahara-ku, Kawasaki-shi,
Kanagawa-ken, Japan
Post Office Address c/o MIXED REALITY SYSTEMS LABORATORY INC.,
145, Hanasakicho 6-chome, Nishi-ku, Yokohama-shi,
Kanagawa-ken, Japan

Full Name of Third Joint Inventor, if any _____
Third Inventor's signature : _____
Date _____ Citizen/Subject of _____
Residence _____
Post Office Address _____

Full Name of Fourth Joint Inventor, if any _____
Fourth Inventor's signature _____
Date _____ Citizen/Subject of _____
Residence _____
Post Office Address _____

Full Name of Fifth Joint Inventor, if any _____
Fifth Inventor's signature _____
Date _____ Citizen/Subject of _____
Residence _____
Post Office Address _____